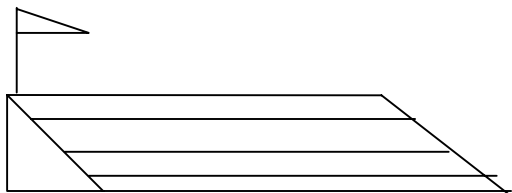


**CITY OF WICHITA
DEPARTMENT OF PARK AND RECREATION
PORTABLE BLEACHERS
APPLICATION**



Date of Application _____

Name of Event _____

Date(s) and Day _____

Location of Event _____

Time of Event (include time for set up and breakdown) _____

Event Set Up Time _____ Event End Time _____

Event Sponsor _____

Contact Person _____

Address _____ Zip Code _____

Telephone Business _____ Telephone Home _____

FAX# _____ E-mail Address _____

\$115 Per day fee

\$100 Security deposit

PLEASE RETURN APPLICATION TO:

Department of Park and Recreation
455 North Main, 11th Floor
Wichita, KS 67202
FAX: 268-4447